

WILSON (H.P.C.)

The  
President's Annual Address.

BY

H. P. C. WILSON, M.D.,

BALTIMORE, MD.



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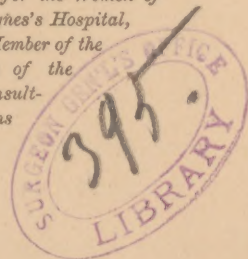


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PRESIDENT'S ANNUAL ADDRESS.

BY

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## THE PRESIDENT'S ANNUAL ADDRESS.

BY H. P. C. WILSON, M.D.,  
*Baltimore, Md.*

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FELLOWS OF THE AMERICAN GYNECOLOGICAL SOCIETY :  
For the honor which you have conferred upon me in calling me to preside over your deliberations, I tender you my hearty thanks. I realize that your partiality has overbalanced your judgment; that many now before me are more worthy of the honor; but not one more zealous for the good of this Society; not one more proud of the record it has made; not one more ambitious for its glorious future.

When I look down the line of preëminent men who have preceded me (some of whose names are as household words wherever the word "woman" is pronounced); when I remember their achievements in this Society, as elsewhere, and realize that I stand here to take up the work which they have laid down, I should feel my utter helplessness but for that generosity and support which I see beaming from every face before me.

As officers and privates, then, let us stand together in the future as in the past—a solid band, battling for the truth in all that pertains to knowledge in obstetrics and gynecology.

Let me congratulate you on meeting again under such favorable auspices, in this charming city, always distinguished for its men of culture, its lights in science, its overflowing hospitality. "A feast of reason, and a flow of soul, are vouchsafed to us." Here we shall study obstetrics and gynecology, pure and unadulterated (which is the sole purpose of this

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Society), free from the distractions of all other ologies—free from the interruptions of large assemblies, with so many diversified interests. Here, too, we shall again cultivate those social qualities which have been such a charm at our annual meetings, and which have drawn us so closely together.

The social feature of this Society is far more than mere eating and drinking. It brings the Fellows together in such close intimacy that the views of one are readily exchanged for the views of another; minute points in science and in practice are explained by man to man; obscure points in papers and debates are made clear; little things in operations and therapeutics (so essential) are elucidated, as cannot be done in the set essays and impromptu debates of the stated meetings. In mercantile language, our social gatherings are gynecology "on change," and we would hold on to them as a powerful lever in elevating this Society.

#### FOUNDATION MEETING.

On the 3d of June, 1876, in the hall of the New York Academy of Medicine, nineteen gentlemen were assembled to found the American Gynecological Society. Twenty others, who were prevented from being present, sent in their approbation and hearty coöperation in the work undertaken; and thus thirty-nine names constituted the Foundation Fellows of this Society.

Of these, eight are dead: Drs. E. Randolph Peaslee, J. Marion Sims, Washington L. Atlee, Albert H. Smith, James P. White, James D. Trask, Charles Buckingham, and E. E. Waller. When shall we look upon their like again? "They rest from their labors, but their works do follow them."

Five have resigned on account of age, ill health, or other unavoidable circumstances. They have helped to bear the heat and burden of the day, and rest from their labors. As the shades of evening draw around them, our blessings will follow them.

Thus, of the thirty-nine Foundation Fellows, thirteen have passed from active membership—one-third of our original number.

Of those who have joined us by election, we have lost eight—five by resignation and three by death. The latter are Drs. John Scott, James B. Hunter, and Ellwood Wilson ; making twenty-one Fellows in all lost to active fellowship in this Society since its foundation.

To Dr. James B. Chadwick, of Boston, belongs the conception of this Society. By nineteen pioneers in gynecology its birth was accomplished. To Dr. Fordyce Barker, more than to any other single Fellow, is due its rapid growth to the stature of a strong and full-grown man. The recognition of his preëminent abilities, and of his labors in its behalf, has been manifested by his having been three times called unanimously to preside over its meetings—an honor which has never been accorded to any other Fellow. While naming these, I would not detract one iota from the vigorous work by other Fellows, who have done so much to make the American Gynecological Society what it is to-day. Their labors are before you in our published *Transactions*, and crown them with honor.

#### FIRST ANNUAL MEETING.

On the 13th of September, 1876, more than thirteen years ago, we held our first annual meeting in the Hall of the New York Academy of Medicine. Twenty-eight Fellows were present, and a number of distinguished foreign guests. It was my privilege to be there, and it has been with great pleasure and profit that I have attended every annual meeting since. I have always been present to answer to my name when the roll was called, and have never left till after final adjournment. I have watched with great interest and pride the history of this Society. To it can be traced many of my greatest achievements in life, and through it have been made many of my best and dearest friends. It is no wonder, then, that I should be



proud of the appreciation in which it is held at home and the fame that follows it abroad.

Wherever I have been in foreign lands, it has frequently been a passport to me in medical circles to be known as a member of the American Gynecological Society. In one instance, when I was erroneously announced as its president, before the mistake could be corrected I received such an ovation as nearly took my breath from me. I have repeatedly been told by medical men in Europe of the admiration they had for this Society, and the pleasure it would give them to be of its membership; and it has gained for me access to persons and places from which I should otherwise have been excluded.

It is of the first importance, then, to me, as to every Fellow, that the reputation of this Society should be maintained, yea, lifted far above its present elevated position. We must advance, and not rest on our past achievements.

I have already told you how many of the founders of this Society are gone; how many of those who have followed them have retired; how many more are travelling down the hill of life, burdened with the weight of years and loaded with innumerable cares; and how many more in the prime of life are overwhelmed by the daily duties of practical gynecology from early morn to lingering eve, with nothing left of time and strength for scientific investigation. These are the men who, under great difficulties, as pioneers, have done so much to bring gynecology to its present position—nothing daunted by the shafts of ridicule, the detractions of jealousy, the threats of prosecution. Sims and his followers have pressed onward, till this branch of medicine is now established on everlasting foundations.

In the natural course of things, these early workers must soon rest from their labors. Their scalpels and speculums must pass into other hands; but it is with great pleasure and satisfaction that, in looking over this assemblage, I see so many men of youth, strength, and diligence, with brilliancy



of mind and nobleness of purpose, to whom the interests of this Society can be entrusted, with the assurance that its position will be placed higher and higher in the temple of fame. Older men must step aside, younger men must take up the burden.

For the future of this Society, nothing has given me more anxiety than the selection of new Fellows. We want as members the men in our land. Men of brains—laborious men—gentlemen. Men who, with cultivated minds, by patient research can verify or disprove many of our crude pathological ideas. We want more scientific investigation into the pathology of diseases we are called on to treat. A sound pathology always insures a better therapeutics. This kind of work can not be demanded of the older members, who are constantly overwhelmed with the cares of daily practice, and whose minds are preoccupied with the questions of saving life and alleviating suffering.

It is to the younger men of this Society that we must especially look for contributions of original research which, in time, I trust, will make its *Transactions* the storehouse of all that is sound in theory and best in practice. They are not yet overwhelmed with patients, and while they have the time, the strength, the fire of youth, which stimulates to exploration, we would call on them to work for gynecology as they will not be able to do in later years. Then gynecology will work for them.

I would increase the membership of this Society, not because "in a multitude of counsellors there is wisdom" (this is not always true), but because from our widely extended country, many Fellows are frequently unable to attend the annual meetings, and we are sometimes reduced to a small working force. Again, with a larger membership, we would have greater diversity of talent from which to bring forth things new and old.

I would abolish the third article of the Constitution, which relates to the election of Fellows. I would enlarge our num-

ber from time to time by invitations to join, and cut off all applications for Fellowship. It was by invitation that this Society was formed. It should be by invitation that it is continued and enlarged. In this way we would get the best men in our country, many of whom are now deterred, by the gauntlet they have to run, from applying for membership. In this way also we should escape some of the unpleasant things which confront us at each business meeting.

I would restrain this Society from all entangling alliances with other societies. The distractions of such large assemblies are not promotive of the best work in any specialty. If we would make it the great authority on all gynecological subjects; if we would make it the first in wisdom, as the first in age, we must abstain from too much allegiance to other societies, and let our full strength be concentrated here. Whatever time and labor are expended on them, will be subtracted from this, and by so much will its vigor and strength be diminished.

I would hold with unyielding tenacity to the social features of this Society. Nothing should be allowed to interfere with them. The cultivation of the heart is hardly second to the cultivation of the head. Cold comfort is a damper to the soul. Nothing so much as our social gatherings has tended to bind us so firmly together—a united band of brethren.

#### LAPAROTOMY DURING MENSTRUATION.

But, gentlemen, before closing this address, which you have required me to deliver, and which is more trying to me than many laparotomies, let me present you with one question: Shall we perform laparotomy immediately before or during menstruation?

This is a question which frequently embarrassed me in my earlier professional experience. Books were searched and authorities consulted for its elucidation, but I found nothing to enlighten me on the subject. The medical friends with whom I consulted, advised against such a procedure. In ad-

dition to this came the paper of Dr. Horatio R. Storer, read at the first meeting of this Society, in 1876, in which he concludes "that for pelvic operations, all things being equal, it is better to select the week immediately following the cessation of the catamenia," for all such operations.

Operations per vaginam may require the selection of the "uterine ebb," where such choice can be made; as the dressings and attention necessary afterward may be embarrassed by menstruation; but for laparotomies involving the pelvic organs, my experience teaches me to select the "uterine flood" rather than the "uterine ebb." During the uterine flood the circulation and innervation are in a state of tonic excitement; during the uterine ebb they are in a state of relaxation and depression, and patients are then more liable to passive hemorrhages, the absorption of septic poison, and the deadly influence of shock, than where the system is under the stimulus of the uterine flood. Moreover, I believe that the local bloodletting from the intra-uterine mucous membrane is a healthy derivation from many of the dangers of such operations.

It may be said that inflammatory troubles are more apt to be set up during the uterine flood. This position, I think, untenable; but if so, it is more than counterbalanced by the derivative and depleting effects of the local bloodletting. I would ask the Fellows, How many of their laparotomies have been lost by inflammation other than septic? I cannot recall one in my own experience. Shock, hemorrhage, and blood-poisoning have been the causes of death in all cases that I have lost, and blood-poisoning oftener than all other causes together.

On June 19, 1871—more than eighteen years ago—I performed ovariectomy on Mrs. C. C. W. The operation had been fixed for that day. All arrangements had been made. The weather was extremely hot; the patient was alarmingly feeble; all efforts to build up her strength were futile. She was rapidly losing strength, and I realized she could not survive much longer.



When I reached the house, where a number of physicians were assembled, I found that Mrs. W. was menstruating very freely; five or six days before her time. I was in great perplexity what to do. With the patient's great feebleness, and the debilitating effects of the intense heat of summer in a large city, I did not think she could much longer survive. My preconceived opinions were, that no operation or any of the pelvic organs should be done during menstruation. There was no authority to which I could turn to extricate me from my dilemma. My professional brethren did not venture an opinion. I came to the unaided conclusion that it was more dangerous to my patient for me to retreat than to advance.

I removed the tumor. The woman made a good recovery. Her menses were very free for several days after the operation. This was my second case of ovariectomy—both successful.

In December, 1880, I removed both ovaries from Miss A. E. by abdominal section. This was the first operation of the kind, by this method, in the State of Maryland. The operation was done to bring on the menopause in a woman, bleeding to death from a myoma in the uterine walls. She was within five days of menstruation. It came on the day of the operation, and was very profuse. She is now living—in perfect health, and married—taking care of her paralyzed husband and a large family of children by his former wife.

I might go on to report many cases on whom I have performed laparotomy very near, or during menstruation, but I will not detain you. Within the past year I have done a number of such, and every one has recovered. I have never lost a case of laparotomy done immediately before or during menstruation; and I am thus forced to make the uterine flood, and not the “uterine ebb”—the time of selection for all such operations.

But, gentlemen, there is a limit to all things, even to your patience, which has been great. I thank you for your kindness. You will thank me for—well, I will not say what.

A few words more, and I am done.

Since our last annual meeting, death has dealt us a terrible blow in cutting down two of our most esteemed and honored Fellows—Drs. James B. Hunter and Ellwood Wilson.

In no single year has He been so merciless to us. Two for one in every previous year. The strength of this society is made up of just such material. They were corner-stones in this superstructure. As one stone crumbles, another stronger one must replace it. None of us has done more for the honor of this society than these, our departed brothers.

To other hands I leave the preparation of memorials worthy of their character, while we sorrow over our loss.

“In the midst of life, we are in death.” Who shall be the next to fall? God grant that we may so live as to be prepared to die.







